SUBMIT COMPLETED ORIGINAL APPLICATION, TAX STATEMENT AND FEE TO:

Washburn, WI 5 (715) 373-6138 Bayfield County Zoning Department P.O. Box 58 WI 54891

BAYFIELI

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE Changes in plans must be approved by the Zoning Department.

Legal Description

Use Tax Statement for Legal Description

LAND USE

SANITARY 🗌

Property Owner Michael

ss of Property 43610 Co 14wy

Volume 1077

Gov't Lot

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN	
	Application No.: 10 \(\sigma\) Date: \(\frac{\S' \array}{D \text{DDD}}\)
Bayfield Co. Zoning Dept.	Wing Dept. Amount Paid: \$\S\S\ID\ID\ID\ID\ID\ID\ID\ID\ID\ID\ID\ID\ID\
ermits will be issued until all fees are paid. le to: Bayfield County Zoning Department. STRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT. se approved by the Zoning Department.	TO APPLICANT.
ANITARY 🗍 PRIVY 🗍 CONDITIONAL USE 🗎	SE SPECIAL USE B.O.A. OTHER
r Legal Description 1/4 of	niship 43 North, Range 6 West. Town of Nama Cause
Block NHE Coll	Acreage
	00-33/
had McDulty	Contractor XXIT Has (Phone) 113-117-129
7 5821	Authorized Agent (Phone)
39-3336 (Home) (Work)	Written Authorization Attached: Yes 🗍 No 🐹
Shoreland Zone? Yes 🛛 No 🗍 If yes.	Distance from Shoreline: greater than 75' 🔯 75' to 40' 🔲 less than 40 🗍
Addition Existing Square Footage / 2.00	Basement: Yes No Number of Stories Sanitary: New Existing Privy City Type of Septic/Sanitary System NOUN
a topour or woman or (a or a control)	☐ Commercial Principal Building
ck-porch (# or beardons)	☐ Commercial Principal Building Addition (explain)
Deck(2) sq. ft	☐ Commercial Accessory Building (explain)
ached garage (# of bedrooms)	☐ Commercial Accessory Building Addition (explain)
Garage sq. ft	☐ Commercial Other (explain)
1 Alteration (explain)	☐ Special/Conditional Use (explain)
ory Building Addition (explain)	☐ External Improvements to Principal Building (explain)
explain)	☐ External Improvements to Accessory Building (explain)
JRE TO OBTAIN A PERMIT <u>or</u> STARTING CONSTRUC	JRE TO OBTAIN A PERMIT <u>of</u> STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN <u>PENALTIES</u>

Fair Market Value 23,000

☐ * Residence or Principal Structure (# of bedrooms)

Structure:

New

Telephone 319-939-3336 (Home)

200

EH

Is your structure in a Shoreland Zone?

FAILURE TO OBTAIN A PERMIT of STARTIN

🗶 Residential Accessory Building (explain)_

☐ Residential Addition / Alteration (explain)

Residence sq. ft.

☐ * Residence w/attached garage (# of bedrooms)

Deck sq. ft.

Residence sq. ft.

Residence sq. ft.

☐ Residential Accessory Building Addition (explain)

☐ Residential Other (explain)

I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by **Bayfield County** in determining whether to issue a permit. I (we) further accept liability which may be a result of **Bayfield County** relying on this information I (we) am (are) providing in or with this application. I (we) consent to country officials charged with administering country optimates to have access to the above described property at any reasonable time for the purpose of inspection.

Owner or Authorized Agent (Signature)

Date

Date

Reason for Denial: Inspection Record: Well Stabed Meets all set backs.	Date 8-83-18 Permit Number 18-0318	Permit Issued: State Sanifary Number	* See Notice on Back APPLICANT — PLEASE COMPLETE REVERSE SIDE	Address to send permit Scott Hour 23055 Missionary OR Cable WI 54821	
2	. Permit Denied (Date)	D	VERSE SIDE	7.54821	
	Date)	Date	(If you recently purchased the property Attach a Copy of Recorded Deed)	— ATTACH Canv of Tax Statement or V	

Secretaries State Rec'd for Issuance ANG CYBER Signed

habitation. Me with under

Witigation Plan Required: Yes

N S

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Date of Inspection

8-20-12

Variance (B.O.A.) #

MARCO

Human

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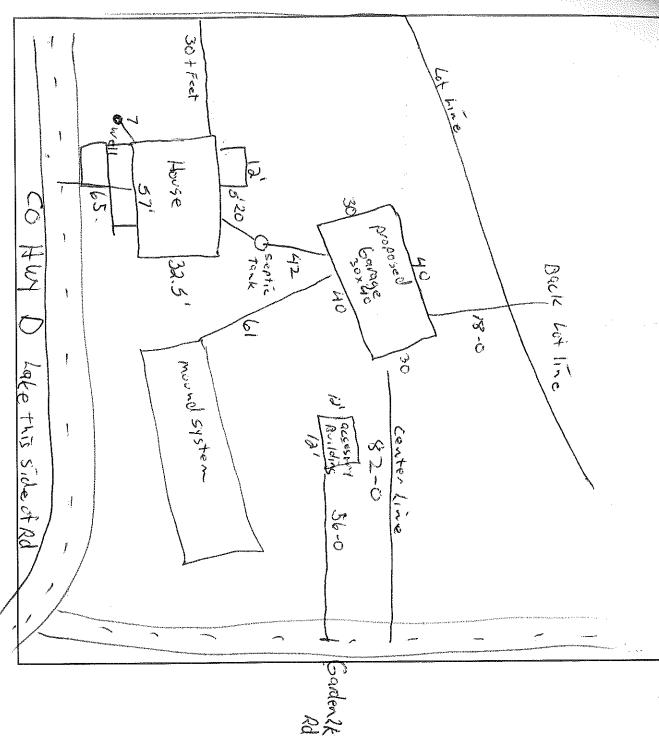
Starter

Date of Approval でしょうの

7.5'x16.6'-12×14

> gravel driveway treat deck leater 85×37 17836

Lot Line



Name of Frontage Road (_Co Hwy D Garder 14 Rd

- Name the frontage road and use as a guideline, fill in the lot dimensions and indicate North (N).
- N Show the location, size and dimensions of the structure
- လ Show the location, size and dimensions of attached deck(s), porch(s) or garage
- \$ Show the location of the well, holding tank, septic tank and drain field

IMPORTANT
DETAILED PLOT PLAN
IS NECESSARY, FOLLOW
STEPS 1-8 (a-o) COMPLETELY.

- ĊΊ Show the location of any lake, river, stream or pond if applicable.
- Show the location of other existing structures
- Show the location of any wetlands or slopes over 20 percent.
- co Show dimensions in feet on the following:
- Building to all lot lines
- Building to centerline of road
- Building to lake, river, stream or
- Holding tank to closest lot line
- Holding tank to building
- Holding tank to well
- Holding tank to lake, river, stream or pond Privy to closest lot line

- Privy to building Privy to lake, river, stream or pond
- Septic Tank and Drain field to closest lot line
- Septic Tank and Drain field to building
- 3
- òΞ Septic Tank and Drain field to well Septic Tank, and Drain field to lake, river, stream or pond. Well to building

*NOTICE: All Land Use Permits Expire One (1) Year From The Date Issued

For The Construction Of New One & Two Family Dwellings: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code. You Must Contact Your Town Chairman / Clerk For More Information.

The local town, village, city, state or federal agencies may also require permits

will not make an inspection until location(s) are staked or marked Stake or mark proposed location(s) of new building, holding tank, septic, drain field, privy, and well. Inspector